



2010 ASA Official Roster Form

Event _____ Team name _____
Manager/Coach: _____ Home # _____ Cell # _____
Address: _____ City: _____ State: _____ Zip: _____
FAX #: _____ E-mail: _____

City of Sedona, Parks and Recreation Division Release and Hold Harmless Agreement for the Activities of Basketball, Volleyball, Softball, and Flag Football played upon City of Sedona property or Sedona-Oak Creek Unified School District property.

FOR AND IN CONSIDERATION of the use of the buildings, facilities, and premises of the City of Sedona, Arizona, a municipal corporation, and/or the Sedona-Oak Creek Unified School District, for all activities, the undersigned team and its members herby fully and forever release and discharge the said City of Sedona, and/or Sedona-Oak Creek Unified School District, the County of Yavapai, and the State of Arizona, and any of their servants, employees, Co-sponsors or agents for any and all liability in any way arising from any and all injuries, losses and damages to person and property which might be sustained or received in conjunction with said use.

IN FURTHER CONSIDERATION, the undersigned team and members herby agree to hold harmless and indemnify the said City of Sedona, and/or Sedona-Oak Creek Unified School District, County of Yavapai, and the State of Arizona of and from any and all claims, demands, causes of action, suits of judgments (including costs and expenses incurred in connection therewith) which may hereafter be brought by anyone for loss and damage or personal injury as a result of the above described use.

REGISTRANT: IF YOU ARE UNDER 18 YOU AND YOUR PARENT OR LEGAL GUARDIAN MUST READ THE AGREEMENT BELOW, PRINT AND SIGN YOUR NAME, DATE AND RECORD YOUR DATE OF BIRTH. PLEASE COMPLETE THIS SECTION, PRINT CLEARLY. PARENTS SIGNATURE REQUIRED.

RELEASE FROM LIABILITY AGREEMENT (From Parent)

In consideration of the right to participate in the activity, I release any and all claims for damages and losses suffered by me or my minor child as a result of said participation against the City of Sedona and any officers or agents thereof. I further understand that there are certain risks inherent in this activity and that proper training and physical conditioning are necessary. I hereby agree to assure those risks on my behalf or on behalf of my minor child and to hold harmless the City and its agents. I have read and understand the above.

IN ORDER TO PARTICIPATE IN STRENUOUS PHYSICAL ACTIVITIES, IT IS RECOMMENDED THAT YOU HAVE A PHYSICAL EXAMINATION FROM YOUR PYSICIAN. THE CITY OF SEDONA SHALL NOT BE LIABLE FOR THE LACK OF PREAUTION SHOWN ON THE PARTICIPANTS PART. I have read the above release from liability prior to signing roster form.

Player Name (please print)	Address	Phone#	E-mail address	Age	Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Softball teams must have a minimum of 12 players on their roster. Team accident insurance is not provided by the City of Sedona.

All team and players fees must be paid at the recreation office.

13					
14					
15 Youth Name Parent Name					
16 Youth Name Parent Name					

